



The Housing Authority of the City of Lavonia, Georgia GA094v01

NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

PHA Plan Agency Identification

PHA Name: Lavonia Housing Authority
PHA Number: GA094
PHA Fiscal Year Beginning: 07/2003
PHA Plan Contact Information: Name: Richard A. Whitworth Phone: 1-706-356-8224 TDD: 1-706-356-4746 Email (if available): rwhitworth@alltel.net
Public Access to Information Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply) ☐ Main administrative office of the PHA ☐ PHA development management offices
Display Locations For PHA Plans and Supporting Documents
The PHA Plans (including attachments) are available for public inspection at: (select all that apply) Main administrative office of the PHA PHA development management offices Main administrative office of the local, county or State government Public library PHA website Other (list below)
PHA Plan Supporting Documents are available for inspection at: (select all that apply) Main business office of the PHA PHA development management offices Other (list below)
PHA Programs Administered:
□ Public Housing and Section 8 □ Section 8 Only □ Public Housing Only

Annual PHA Plan Fiscal Year 2003

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Contents	Page #
Annual Plan	
i. Executive Summary (optional)	3
ii. Annual Plan Information	2
iii. Table of Contents	2 3
1. Description of Policy and Program Changes for the Upcoming Fiscal Year	
2. Capital Improvement Needs	4
3. Demolition and Disposition	5
4. Homeownership: Voucher Homeownership Program	6
5. Crime and Safety: PHDEP Plan	6
6. Other Information:	
A. Resident Advisory Board Consultation Process	7
B. Statement of Consistency with Consolidated Plan	7
C. Criteria for Substantial Deviations and Significant Amendments	8
Attachments	
Attachment A: Supporting Documents Available for Review	9
Attachment B : Capital Fund Program Annual Statement	13
Attachment C: Capital Fund Program 5 Year Action Plan	19
Attachment: Capital Fund Program Replacement Housing Factor Annual Statement	
Attachment: Public Housing Drug Elimination Program (PHDEP) Plan	
$\overline{\mathbb{N}}$ Attachment $\overline{\mathbf{D}}$: Resident Membership on PHA Board or Governing Body	29
Attachment E: Membership of Resident Advisory Board or Boards	30
Attachment: Comments of Resident Advisory Board or Boards & Explanation of PHA	
Response (must be attached if not included in PHA Plan text)	
Other (List below, providing each attachment name)	
	31
Attachment G : FY2001 P & E Report	36
Attachment H: Voluntary Conversion	42
Attachment F: FY2002 P & E Report Attachment G: FY2001 P & E Report Attachment H: Voluntary Conversion Attachment I: Deconcentration & Income Mixing Attachment J: Progress on FY2000 Missions and Goals	43
Attachment J: Progress on FY2000 Missions and Goals	44

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

The Lavonia Housing Authority has prepared its Agency Plan in compliance with Section 511 of the Quality Housing and Work Responsibility Act of 1998 (QHWRA) and the Final Rule for the Public Housing Agency Plans as published in the Federal Register on October 21, 1999.

The Lavonia Housing Authority has established meaningful goals and measurable objectives to lead us through the next five fiscal years and to promote the long term viability of the Housing Authority and it's assets and resources. Statutory requirements of the QHWRA have been implemented and certain discretionary policies are now in effect.

The Annual Plan programs and activities are consistent with the missions, goals and objectives outlined in the Five Year Plan. The Annual Plan includes a statement related to housing needs, financial resources, policies, rent determinations, capital improvements, demolition and/or disposition, designation of public housing for elderly families or families with disabilities or elderly families and families with disabilities, conversion of public housing, homeownership, safety and crime prevention and civil rights.

The Lavonia Housing Authority Resident Advisory Board (RAB), residents, other assisted families, the Board of Commissioners, local government officials and representatives of other local public and private sector entities were provided an opportunity to participate in the preparation of the Public Housing Agency Plan.

The Lavonia Housing Authority has made dramatic improvements in the Customer Satisfaction Survey results for FYE 6/30/2001. Our score is 9.3 out of a possible 10 points. We will continue our efforts to improve on safety, communication and appearance as well as hold our current status on maintenance/repairs and services. We recommend that no drastic changes need to be made in our implementation of these sub-indicators, only a continuation of our current plan of action.

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

The Housing Authority will continue to revise existing procedures & programs pursuant to HUD Final Rules. The Authority does not intend to otherwise revise any current policy or program. The Housing Authority will enforce its policy to provide for deconcentration of poverty and encourage income mixing by bringing in higher income families into lower income developments and lower income families into higher income developments.

2. Capital Improvement Needs [24 CFR Part 903.7 9 (g)] Exemptions: Section 8 only PHAs are not required to complete this component. A. ☑ Yes ☐ No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan? B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$308,874.00 C. ☑ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component. D. Capital Fund Program Grant Submissions (1) Capital Fund Program 5-Year Action Plan The Capital Fund Program 5-Year Action Plan is provided as Attachment C (2) Capital Fund Program Annual Statement The Capital Fund Program Annual Statement is provided as Attachment B

3. Demolition and Disposition [24 CFR Part 903.7 9 (h)] Applicability: Section 8 only PHAs are not required to complete this section. 1. \square Yes \boxtimes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component; if "yes", complete one activity description for each development.) 2. Activity Description **Demolition/Disposition Activity Description** (Not including Activities Associated with HOPE VI or Conversion Activities) 1a. Development name: 1b. Development (project) number: 2. Activity type: Demolition Disposition 3. Application status (select one) Approved \[\] Submitted, pending approval Planned application 4. Date application approved, submitted, or planned for submission: (dd/mm/yy) 5. Number of units affected: 6. Coverage of action (select one) Part of the development Total development 7. Relocation resources (select all that apply) Section 8 for units Public housing for units Preference for admission to other public housing or section 8 units (describe below) Other housing for

8. Timeline for activity:

a. Actual or projected start date of activity:

c. Projected end date of activity:

b. Actual or projected start date of relocation activities:

4. Voucher Hom [24 CFR Part 903.7 9 (k)]	
A. Yes No:	Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No",
The PHA has demons Establishin that at leas Requiring t insured or underwriti Demonstra	strated its capacity to administer the program by (select all that apply): ng a minimum homeowner downpayment requirement of at least 3 percent and requiring st 1 percent of the downpayment comes from the family's resources that financing for purchase of a home under its section 8 homeownership will be provided, guaranteed by the state or Federal government; comply with secondary mortgage market ng requirements; or comply with generally accepted private sector underwriting standards ating that it has or will acquire other relevant experience (list PHA experience, or any other
[24 CFR Part 903.7 (m)]	
A. Yes No: 1	s the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA
B. What is the amoun	at of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year?
D. Yes No:	The PHDEP Plan is attached at Attachment .
	Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to next component; if "yes", describe each program using the table below (copy and complete questions for each program identified.) Pacity of the PHA to Administer a Section 8 Homeownership Program A has demonstrated its capacity to administer the program by (select all that apply): Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below): Pety and Crime Prevention: PHDEP Plan Part 903.7 (m)] Part 903.7 (m)] Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan specified requirements prior to receipt of PHDEP funds. Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA
	No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to next component; if "yes", describe each program using the table below (copy and complete questions for each program identified.) The PHA to Administer a Section 8 Homeownership Program emonstrated its capacity to administer the program by (select all that apply): blishing a minimum homeowner downpayment requirement of at least 3 percent and requiring at least 1 percent of the downpayment comes from the family's resources irring that financing for purchase of a home under its section 8 homeownership will be provided, red or guaranteed by the state or Federal government; comply with secondary mortgage market rewriting requirements; or comply with generally accepted private sector underwriting standards constrating that it has or will acquire other relevant experience (list PHA experience, or any other nization to be involved and its experience, below): Crime Prevention: PHDEP Plan [mi] 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan equirements prior to receipt of PHDEP funds. No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer to, skip to next component.

<u>6. Other Information</u> [24 CFR Part 903.7 9 (r)]

	ident A	Advisory Board (RAB) Recommendations and PHA Response
1. 🗌 Y	es 🖂	No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes	s, the c	comments are Attached at Attachment .
		nner did the PHA address those comments? (select all that apply) The PHA changed portions of the PHA Plan in response to comments A list of these changes is included Yes No: below or Yes No: at the end of the RAB Comments in Attachment Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment .
		Other: (list below)
B. Stat	ement	of Consistency with the Consolidated Plan
For each	applicab	ole Consolidated Plan, make the following statement (copy questions as many times as necessary).
1. Cons	solidate	ed Plan jurisdiction: State of Georgia/Department of Community Affairs
	J	as taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan diction: (select all that apply)
	\boxtimes	•

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

The Consolidated Plan supports the PHA Plan of the Lavonia Housing Authority because the PHA Plan meets the priority outlined in the State of Georgia's Consolidated Plan to increase the number of Georgia's low and moderate income households who have obtained affordable, rental housing free of overcrowded and structurally substandard conditions.

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

Substantial deviations are defined as discretionary in the plans or policies of the housing authority that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners or as may be required by HUD.

B. Significant Amendment or Modification to the Annual Plan:

Significant amendments or modifications are defined as discretionary in the plans or policies of the housing authority that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners or as may be required by HUD.

Attachment A Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

	List of Supporting Documents Available for Review						
Applicable &	Supporting Document	Related Plan Component					
On Display							
l	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans					
L	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update) For 2000	5 Year and Annual Plans					
V	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively	5 Year and Annual Plans					
L ®	further fair housing that require the PHA's involvement. Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs					
L	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources					
	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies					
	Any policy governing occupancy of Police Officers in Public Housing check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies					
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies					
L	Public housing rent determination policies, including the method for setting public housing flat rents check here if included in the public housing A & O Policy	Annual Plan: Rent Determination					
l	Schedule of flat rents offered at each public housing development check here if included in the public housing A & O Policy	Annual Plan: Rent Determination					

	List of Supporting Documents Available for Review					
Applicable & On Display	Supporting Document	Related Plan Component				
	Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination				
l	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance				
1	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations				
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency				
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations				
	Any required policies governing any Section 8 special housing types check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance				
V®	Public housing grievance procedures check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures				
	Section 8 informal review and hearing procedures check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures				
l	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs				
L	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs				
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs				
	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs				
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition				
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing				

	List of Supporting Documents Available for Review						
Applicable & On Display	Supporting Document	Related Plan Component					
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing					
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership					
	Policies governing any Section 8 Homeownership program (sectionof the Section 8 Administrative Plan)	Annual Plan: Homeownership					
	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency					
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency					
	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency					
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency					
O	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention					
Lo	PHDEP-related documentation: Baseline law enforcement services for public housing developments assisted under the PHDEP plan; Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; Coordination with other law enforcement efforts; Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.	Annual Plan: Safety and Crime Prevention					
Vo	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) Check here if included in the public housing A & O Policy	Pet Policy					

	List of Supporting Documents Available for Review						
Applicable & On Display	Related Plan Component						
(a)	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit					
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs					
L	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)					
	Voluntary Conversion Deconcentration & Income Mixing	Attachment H Attachment I					

Attachment "B" CAPITAL FUND PROGRAM TABLES START HERE

Annı	ual Statement/Performance and Evalua	ation Report				
Capi	tal Fund Program and Capital Fund P	rogram Replaceme	nt Housing Factor (C	CFP/CFPRHF) Par	t I: Summary	
PHA N GA		Federal FY of Grant: 2003				
	ginal Annual Statement Reserve for Disasters/ Emer formance and Evaluation Report for Period Ending:		Statement (revision no:) and Evaluation Report			
Line No.	Summary by Development Account	Total Estin	mated Cost	Total Ac	Actual Cost	
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2 3	1406 Operations	\$2,874.00				
3	1408 Management Improvements					
5	1410 Administration					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	\$20,000.00				
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	\$286,000.00				
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collaterization or Debt Service					
20	1502 Contingency					
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$308,874.00				
22	Amount of line 21 Related to LBP Activities					
23	Amount of line 21 Related to Section 504 compliance					

Small PHA Plan Update Page 13 **Table Library**

Ann	Annual Statement/Performance and Evaluation Report							
Capi	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary							
PHA N	Name: The Housing Authority of the City of Lavonia,	Grant Type and Number	r		Federal FY of Grant:			
GA	GA Capital Fund Program Grant No: GA06P09450103 2003							
		Replacement Housing Fa	ctor Grant No:					
	ginal Annual Statement $oxedsymbol{\square}$ Reserve for Disasters/ Emer	gencies Revised Annua	al Statement (revision no:)					
Per	formance and Evaluation Report for Period Ending:	Final Performance	e and Evaluation Report					
Line	Summary by Development Account	Total Est	timated Cost	Total Ac	tual Cost			
No.								
		Original	Revised	Obligated	Expended			
24	Amount of line 21 Related to Security – Soft Costs							
25	Amount of Line 21 Related to Security – Hard Costs	\$50,000.00						
26	Amount of line 21 Related to Energy Conservation Measures	\$190,000.00						

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name: The Housing Authority of the City of Lavonia, GA		Grant Type and Number Capital Fund Program Grant No: GA06P09450103 Replacement Housing Factor Grant No:			Federal FY of Grant: 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		timated Cost Total Actual Cost		Status of Work
Tionvinos				Original	Revised	Funds Obligated	Funds Expended	
	<u>OPERATIONS</u>							
PHA Wide	Operations	1406	178	\$2,874.00				
	SUBTOTAL			\$2,874.00				
	FEES & COSTS							
GA094-1	a. Architects fee to prepare bid and	1430.1	24	\$19,000.00				
GA094-2	contract documents, drawings,	1430.1	12	\$0.00				
GA094-3	specifications and assist the PHA at	1430.1	12	\$0.00				
GA094-4	bid opening, awarding the contract, and	1430.1	8	\$0.00				
GA094-5	to supervise the construction work	1430.1	30	\$0.00				
GA094-6	on a periodic basis. Fee to be negotiated	1430.1	6	\$0.00				
GA094-7	Contract Labor	1430.1	20	\$0.00				
GA094-8		1430.1	42	\$0.00				
GA094-9		1430.1	16	\$0.00				
GA094-10		1430.1	8	\$0.00				
	Subtotal			\$19,000.00				
GA094-1	b. Consulting fees for Agency Plan	1430.2	24	\$100.00				
GA094-2	preparation.	1430.2	12	\$100.00				
GA094-3		1430.2	12	\$100.00				
GA094-4		1430.2	8	\$100.00				
GA094-5		1430.2	30	\$100.00				
GA094-6		1430.2	6	\$100.00				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: The Housing Authority of the City of Lavonia, GA		Grant Type and Number Capital Fund Program Grant No: GA06P09450103 Replacement Housing Factor Grant No:			Federal FY of Grant: 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	No. Quantity Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised	Funds Obligated	Funds Expended	
GA094-7		1430.2	20	\$100.00			•	
GA094-8		1430.2	42	\$100.00				
GA094-9		1430.2	16	\$100.00				
GA094-10		1430.2	8	\$100.00				
	Subtotal			\$1,000.00				
	SUBTOTAL			\$20,000.00				
	DWELLING STRUCTURES							
	a. Windows & security screens							
GA094-2		1460	12	\$24,000.00				
GA094-8A		1460	30	\$60,000.00				
GA094-10		1460	8	\$16,000.00				
_	Subtotal			\$100,000.00				
GA094-1	b. Replace exterior doors & install storm	1460	24	\$24,000.00				
GA094-2	doors.	1460	12	\$12,000.00				
GA094-8A		1460	30	\$30,000.00				
GA094-9		1460	16	\$16,000.00				
GA094-10		1460	8	\$8,000.00				
	Subtotal			\$90,000.00				
GA094-1	c. Roofing	1460	24	\$24,000.00				
GA094-3		1460	12	\$12,000.00				

Small PHA Plan Update Page 16 **Table Library**

HUD 50075 OMB Approval No: 2577-0226 Expires: 03/31/2002

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: The H	ousing Authority of the City of	Grant Type and			Federal FY of Grant: 2003			
Lavonia, GA				GA06P09450103				
		Replacement Ho	ousing Factor Gra	ant No:				
Development	General Description of Major Work	Dev. Acct No.	Quantity	Total Estin	nated Cost	Total Ac	tual Cost	Status of
Number	Categories							Work
Name/HA-Wide								
Activities								
				Original	Revised	Funds	Funds	
						Obligated	Expended	
GA094-7		1460	20	\$20,000.00				
GA094-8A		1460	30	\$30,000.00				
GA094-10		1460	8	\$10,000.00				
	Subtotal			\$96,000.00				
	SUBTOTAL			\$286,000.00				
	GRAND TOTAL			\$308,874.00				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule

FY of Grant: 2003 Reasons for Revised Target Dates
Reasons for Revised Target Dates
Reasons for Revised Target Dates

GA094-1	24 Units	GA094-6 6 Units
GA094-2	12 Units	GA094-7 20 Units
GA094-3	12 Units	GA094-8 42 Units
GA094-4	8 Units	GA094-9 16 Units
GA094-5	30 Units	GA094-10 8 Units

Capital Fund Program 5-Year Action Plan

Attachment "C"

Capital Fund Pr Part I: Summary	ogram Fi	ve-Year Action Plan				
PHA Name: Housing A	uthority of			⊠Original 5-Year Plan		
the City of Lavonia, G				Revision No:		
Development Year 1 Number/Name/HA- Wide		Work Statement for Year 2 FFY Grant: 2004 PHA FY: 7/2004 Work Statement for Year 3 FFY Grant: 2005 PHA FY: 7/2005		Work Statement for Year 4 FFY Grant: 2006 PHA FY: 7/2006	Work Statement for Year 5 FFY Grant: 2007 PHA FY: 7/2007	
	Annual Statement					
HA Wide		\$26,874	\$26,874	\$26,874	\$26,874	
C 4 00 4 1		Φ5 000	\$<0.000	фо	ф 202 000	
GA094-1		\$5,000	\$60,000	\$0	\$282,000	
GA094-2 GA094-3		\$102,000 \$0	\$90,000 \$0	\$0 \$0		
GA094-3 GA094-4		\$0	\$0	\$0 \$0		
GA094-4 GA094-5		\$0	\$0	\$0		
GA094-6		\$0	\$0	\$0 \$0		
GA094-7		\$5,000	\$0	\$0 \$0		
GA094-8		\$85,000	\$72,000	\$158,000		
GA094-9		\$60,000	\$24,000	\$76,000		
GA094-10		\$25,000	\$36,000	\$48,000		
CFP Funds Listed for						
5-year planning	\$308,874	\$308,874	\$308,874	\$308,874	\$308,874	
Replacement Housing Factor Funds						

Activities for Year 1		Activities for Year: 2 FFY Grant: 2004 PHA FY: 7/2004		Activities for Year: 3 FFY Grant: 2005 PHA FY: 7/2005			
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost	
See							
Annual	PHA Wide	Operations, Fees & Costs		PHA Wide	Operations, Fees & Costs		
Statement	PHA Wide	1406	\$7,874	PHA Wide	1406	\$7,874	
	PHA Wide	1430	\$19,000	PHA Wide	1430	\$19,000	
		Subtotal	\$26,874		Subtotal	\$26,874	
	GA094-1	Paving	\$5,000				
				GA094-1	Replace Soffits	\$60,000	
	GA094-2	Development Activities	\$102,000				
				GA094-2	Replace Soffits	\$18,000	
	GA094-7	Paving	\$5,000		Walls & Ceilings	\$72,000	
					Subtotal	\$90,000	
	GA094-8	Insulation	\$75,000				
		Paving	\$10,000	GA094-8	Replace Soffits	\$72,000	
		Subtotal	\$85,000				
				GA094-9	Replace Soffits	\$24,000	
	GA094-9	Insulation	\$55,000				
		Paving	\$5,000	GA094-10	Replace Soffits	\$36,000	
		Subtotal	\$60,000				
-	GA094-10	Insulation	\$20,000				
		Paving	\$5,000				
		Subtotal	\$25,000				
			,				
	Total CFP Estima	ted Cost	\$308,874			\$308,874	

Capital Fund Program Five-Year Action Plan **Part II: Supporting Pages—Work Activities** Activities for Year: 4 Activities for Year: 5 FFY Grant: 2006 FFY Grant: 2007 PHA FY: 7/2006 PHA FY: 7/2007 Development **Major Work Estimated Cost Development Major Work Estimated Cost** Name/Number Categories Name/Number Categories Operations, Fees & Operations, Fees & PHA Wide PHA Wide Costs Costs PHA Wide 1406 \$7,874 1406 \$7,874 PHA Wide PHA Wide 1430 \$19,000 PHA Wide 1430 \$19,000 \$26,874 \$26,874 **Subtotal** Subtotal GA094-1 Renovations/Additions \$50,000 of Community, office & maintenance GA094-8 A/C \$158,000 \$25,000 Site Improvements GA094-9 A/C \$76,000 \$25,000 Visitability GA094-10 A/C \$48,000 Office, Maintenance & \$50,000 Community Equipment **Development Activities** \$122,000 Ranges & Refrigerators \$10,000 Subtotal \$282,000 **Total CFP Estimated Cost** \$308,874 \$308,874

Public Housing Drug Elimination Program Plan

Annual	PH	IDEP	Plan	Table of	Contents:
--------	----	------	------	----------	------------------

- 1. General Information/History
- 2. PHDEP Plan Goals/Budget
- 3. Milestones
- 4. Certifications

Section 1:	General	Informa	tion	/History
Decidi II	General			, allower ,

- A. Amount of PHDEP Grant ____
- B. Eligibility type (Indicate with an "x") N1_____ N2___ R____
- C. FFY in which funding is requested -
- D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

	reas								
							otal number of	units in each PHDEP Targe	et
Area, and the tot	al number of indi	viduals expected to partici	pate in PHDEP sponsor	ed activities in e	each Target Area	l.			
PHDEP Target	Areas		Total # of Units wit	thin the T	otal Population	to be Served v	vithin the		
	opment(s) or site)	PHDEP Target A			Target Area(s)			
			3			8 0			
	. –								
F. Duration		.1 6 1 1111	1) C.1 DUDED D	1	1 11 D1 (1 ""	1' 1	.1 .6 1	.1
	entify the # of mor		red) of the PHDEP Prog	ram proposed u	nder this Plan (p	place an "x" to in	idicate the leng	th of program by # of mont	tns.
Tor Other, Ide	mility the n of mor	10137.							
6 Mor	nths	*	18 Months	24 Months	Othe	r			
6 Mor	nths	*	18 Months	24 Months	Othe	r			
	nths Program Histo	12 Months	18 Months	24 Months	Othe	r			
G. PHDEP P	Program Histo That funding has	12 Months ory been received under the P	PHDEP Program (place a	nn "x" by each a	pplicable Year)	and provide amo		g received. If previously fur	
G. PHDEP F Indicate each FY programs have n	Program Histo that funding has ot been closed ou	12 Months ory been received under the P	PHDEP Program (place a	nn "x" by each a	pplicable Year)	and provide amo		g received. If previously fur eceived, place "GE" in colu	
G. PHDEP F Indicate each FY programs have n "W" for waivers	Program Histo that funding has ot been closed ou	12 Months bry been received under the Pt at the time of this submis	PHDEP Program (place a ssion, indicate the fund b	an "x" by each a	pplicable Year) cipated completi	and provide amo			
G. PHDEP F Indicate each FY programs have n "W" for waivers Fiscal Year of	Program Histo 7 that funding has ot been closed ou PHDEP	12 Months ory been received under the P	PHDEP Program (place a ssion, indicate the fund b	an "x" by each a palance and antio	pplicable Year) cipated completi Grant Start	and provide amo on date. For gra Grant Term			
G. PHDEP F Indicate each FY programs have n "W" for waivers	Program Histor that funding has ot been closed ou PHDEP Funding	12 Months bry been received under the Pt at the time of this submis	Fund Balance as of Date of	an "x" by each a palance and antice Grant Extensions	pplicable Year) cipated completi	and provide amo			
G. PHDEP F Indicate each FY programs have n "W" for waivers Fiscal Year of	Program Histo 7 that funding has ot been closed ou PHDEP	12 Months bry been received under the Pt at the time of this submis	PHDEP Program (place a ssion, indicate the fund b	an "x" by each a palance and antio	pplicable Year) cipated completi Grant Start	and provide amo on date. For gra Grant Term			
G. PHDEP F Indicate each FY programs have n "W" for waivers Fiscal Year of	Program Histor that funding has ot been closed ou PHDEP Funding	12 Months bry been received under the Pt at the time of this submis	Fund Balance as of Date of	an "x" by each a palance and antice Grant Extensions	pplicable Year) cipated completi Grant Start	and provide amo on date. For gra Grant Term			
G. PHDEP F Indicate each FY programs have n "W" for waivers Fiscal Year of	Program Histor that funding has ot been closed ou PHDEP Funding	12 Months bry been received under the Pt at the time of this submis	Fund Balance as of Date of	an "x" by each a palance and antice Grant Extensions	pplicable Year) cipated completi Grant Start	and provide amo on date. For gra Grant Term			
G. PHDEP F Indicate each FY programs have n "W" for waivers Fiscal Year of	Program Histor that funding has ot been closed ou PHDEP Funding	12 Months bry been received under the Pt at the time of this submis	Fund Balance as of Date of	an "x" by each a palance and antice Grant Extensions	pplicable Year) cipated completi Grant Start	and provide amo on date. For gra Grant Term			
G. PHDEP F Indicate each FY programs have n "W" for waivers Fiscal Year of	Program Histor that funding has ot been closed ou PHDEP Funding	12 Months bry been received under the Pt at the time of this submis	Fund Balance as of Date of	an "x" by each a palance and antice Grant Extensions	pplicable Year) cipated completi Grant Start	and provide amo on date. For gra Grant Term			
G. PHDEP F Indicate each FY programs have n "W" for waivers Fiscal Year of	Program Histor that funding has ot been closed ou PHDEP Funding	12 Months bry been received under the Pt at the time of this submis	Fund Balance as of Date of	an "x" by each a palance and antice Grant Extensions	pplicable Year) cipated completi Grant Start	and provide amo on date. For gra Grant Term			

Small PHA Plan Update Page 23 **Table Library**

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FY PHDEP Budget Summary						
Budget Line Item	Total Funding					
9110 – Reimbursement of Law Enforcement						
9120 - Security Personnel						
9130 - Employment of Investigators						
9140 - Voluntary Tenant Patrol						
9150 - Physical Improvements						
9160 - Drug Prevention						
9170 - Drug Intervention						
9180 - Drug Treatment						
9190 - Other Program Costs						
TOTAL PHDEP FUNDING						

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 - Reimbursement of Law Enforcement				Total PHDEP Funding: \$			
Goal(s)					•		
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9120 - Security Personnel					Total PHDEP Funding:		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.		·					

9130 - Employment of Investigators					Total PHDEP Funding:			
Goal(s)								
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.		<u>-</u>						

9140 - Voluntary Tenant Patrol					Total PHDEP Funding:			
Goal(s)								
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.								

9150 - Physical Imp	9150 - Physical Improvements					Total PHDEP Funding:			
Goal(s)									
Objectives									
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators		
1.									
2.									
3.									

7100 210g1101011					Total PHDEP Funding: \$			
Goal(s)								
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								

9170 - Drug Intervei	71.0 21 .0 1.001					Total PHDEP Funding:			
Goal(s)									
Objectives									
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators		
1.									
2.									
3.		·							

9180 - Drug Treatm	9180 - Drug Treatment					Total PHDEP Funding:			
Goal(s)									
Objectives									
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators		
1.									
2.									
3.									

9190 - Other Program Costs					Total PHDEP Funds:			
Goal(s)					•			
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding	Performance Indicators	
1.								
3.								

Section 3: Expenditure/Obligation Milestones

Indicate by Budget Line Item and the Proposed Activity (based on the information contained in Section 2 PHDEP Plan Budget and Goals), the % of funds that will be expended (at least 25% of the total grant award) and obligated (at least 50% of the total grant award) within 12 months of grant execution.

Budget Line Item #	25% Expenditure of Total Grant Funds By Activity #	Total PHDEP Funding Expended	50% Obligation of Total Grant Funds by Activity #	Total PHDEP Funding Obligated
	Activities 1, 3		Activity 2	
9110				
9110				
9130				
9140				
9150				
9160				
9170				
9180				
9190				
TOTAL				

Section 4: Certifications

Attachment D: Resident Member on the PHA Governing Board 1. \boxtimes Yes \square No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2) A. Name of resident member(s) on the governing board: **Ms. Annie Alewine** B. How was the resident board member selected: (select one)? Elected Appointed C. The term of appointment is (include the date term expires): 1 Year - 12/31/03 2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not? the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board. Other (explain): B. Date of next term expiration of a governing board member: C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Mr. Ralph Owens, Mayor of the City of Lavonia

Attachment E: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

The Resident Advisory Board Members are:

Mack Johnson Amos & Sharon Gaines

80 McMurry Circle 254 Cornog Rd. Lavonia, Ga. 30553 Lavonia, Ga 30553

Majoria Rucker Jessie Presnell 13100-B Jones St. 234 Linton Ave. Lavonia, Ga. 30553 Lavonia, Ga. 30553

Mary McIntosh
Betty Norris
13100-C Jones St.
5451 Ga. Hwy. 17
Lavonia, Ga. 30553
Canon, Ga. 30520

Jean SimpsonDorothy Emory81-D Third St.5415 Ga. Hwy. 17Lavonia, Ga. 30553Canon, Ga. 30520

Linda Joseph Martha Brawner
P.O. Box 623 231 Linton Ave.
Carnesville, Ga 30521 Lavonia, Ga. 30553

Lora Bowman Ida Mae Feaster 361 Crest Circle 55 Hicks Circle Lavonia, Ga. 30553 Lavonia, Ga. 30553

Stewart Butler Berdie Gains
64 Hall Heights 21 B Third Street
Carnesville, Ga 30520 Lavonia, Ga 30553

Johnny SmithJohn Sarkinen178 Crest Circle101 McMurry Cir.Lavonia, Ga 30553Lavonia, Ga 30553

Sandra Mayfield 88 McMurry Cir. Lavonia, Ga 30553

Attachment F – FY2002 P & E Report <u>CAPITAL FUND PROGRAM TABLES START HERE</u>

Ann	ual Statement/Performance and Evalua	ation Report			
Capi	ital Fund Program and Capital Fund P	rogram Replaceme	ent Housing Factor (CFP/CFPRHF) Pa	art I: Summary
PHA I	Name: The Housing Authority of the City of Lavonia,	Grant Type and Number			Federal FY of Grant:
GA	,	Capital Fund Program Gra	nt No: GA06P09450102		2002
		Replacement Housing Fac			
Ori	ginal Annual Statement Reserve for Disasters/ Emer	rgencies 🛛 Revised Annua	Statement (revision no: 1)		
⊠Per	formance and Evaluation Report for Period Ending: 1	2/31/02 Final Perform	ance and Evaluation Report	<u>t</u>	
Line	Summary by Development Account	Total Esti	mated Cost	Total	Actual Cost
No.					
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$2,878.00	\$91,945.60	\$89,067.60	\$0.00
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$20,000.00	\$19,500.00	\$0.00	\$0.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$285,996.00	\$197,428.40	\$0.00	\$0.00
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines $2-20$)	\$308,874.00	\$308,874.00	\$89,067.60	\$0.00
22	Amount of line 21 Related to LBP Activities				

Small PHA Plan Update Page 31 **Table Library**

Ann	ual Statement/Performance and Evalua	ation Report									
Capi	tal Fund Program and Capital Fund P	rogram Replaceme	nt Housing Factor (CFP/CFPRHF) Par	t I: Summary						
PHA N	Name: The Housing Authority of the City of Lavonia,	Grant Type and Number			Federal FY of Grant:						
GA		Capital Fund Program Gra	nt No: GA06P09450102		2002						
	Replacement Housing Factor Grant No:										
	Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: 1)										
⊠ Per	formance and Evaluation Report for Period Ending: 1	2/31/02 Final Perform	ance and Evaluation Report								
Line	Summary by Development Account	Total Esti	mated Cost	Total Ac	tual Cost						
No.											
		Original	Revised	Obligated	Expended						
23	Amount of line 21 Related to Section 504 compliance										
24	Amount of line 21 Related to Security – Soft Costs										
25	Amount of Line 21 Related to Security – Hard Costs										
26	Amount of line 21 Related to Energy Conservation	\$285,996.00	\$197,428.40	\$89,067.60	\$0.00						
	Measures										

Annual Statement/Performance and Evaluation Report Budget Revision #1 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 12/31/02

Part II: Supporting Pages

PHA Name: The H Lavonia, GA	Housing Authority of the City of	Replacement Ho	ogram Grant No: ousing Factor Gra	_			Federal FY of Grant: 2002			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work		
				Original	Revised	Funds Obligated	Funds Expended			
	<u>OPERATIONS</u>									
PHA Wide	Operations	1406	178	\$2,878.00	\$91,945.60	\$89,067.60	\$0.00	Obligation in		
	SUBTOTAL			\$2,878.00	\$91,945.60	\$89,067.60	\$0.00	Process		
	FEES & COSTS									
GA094-1	a. Architects fee to prepare bid and	1430.1	24	\$19,000.00	\$0.00	\$0.00	\$0.00			
GA094-2	contract documents, drawings,	1430.1	12	\$0.00	\$0.00	\$0.00	\$0.00			
GA094-3	specifications and assist the PHA at	1430.1	12	\$0.00	\$3,750.00	\$0.00	\$0.00	In		
GA094-4	bid opening, awarding the contract, and	1430.1	8	\$0.00	\$3,750.00	\$0.00	\$0.00	Negotiation		
GA094-5	to supervise the construction work	1430.1	30	\$0.00	\$3,750.00	\$0.00	\$0.00	"		
GA094-6	on a periodic basis. Fee to be negotiated	1430.1	6	\$0.00	\$3,750.00	\$0.00	\$0.00	"		
GA094-7	Contract Labor	1430.1	20	\$0.00	\$3,750.00	\$0.00	\$0.00	"		
GA094-8		1430.1	42	\$0.00	\$0.00	\$0.00	\$0.00			
GA094-9		1430.1	16	\$0.00	\$0.00	\$0.00	\$0.00			
GA094-10		1430.1	8	\$0.00	\$0.00	\$0.00	\$0.00			
	Subtotal			\$19,000.00	\$18,750.00	\$0.00	\$0.00			
GA094-1	b. Consulting fees for Agency Plan	1430.2	24	\$100.00	\$75.00	\$0.00	\$0.00	In		
GA094-2	preparation.	1430.2	12	\$100.00	\$75.00	\$0.00	\$0.00	Negotiation		
GA094-3		1430.2	12	\$100.00	\$75.00	\$0.00	\$0.00	"		
GA094-4		1430.2	8	\$100.00	\$75.00	\$0.00	\$0.00			
GA094-5		1430.2	30	\$100.00	\$75.00	\$0.00	\$0.00	"		
GA094-6		1430.2	6	\$100.00	\$75.00	\$0.00	\$0.00	٠,		

Small PHA Plan Update Page 33

Table Library

HUD 50075 OMB Approval No: 2577-0226 Expires: 03/31/2002

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 12/31/02 Part II: Supporting Pages

PHA Name: The H Lavonia, GA	Tousing Authority of the City of		l Number ogram Grant No: ousing Factor Gra		2	Federal FY of Grant: 2002			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin	mated Cost	Total Ac	tual Cost	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended		
GA094-7		1430.2	20	\$100.00	\$75.00	\$0.00	\$0.00	44	
GA094-8		1430.2	42	\$100.00	\$75.00	\$0.00	\$0.00	"	
GA094-9		1430.2	16	\$100.00	\$75.00	\$0.00	\$0.00	"	
GA094-10		1430.2	8	\$100.00	\$75.00	\$0.00	\$0.00	"	
	Subtotal			\$1,000.00	\$750.00	\$0.00	\$0.00		
	SUBTOTAL			\$20,000.00	\$19,500.00	\$0.00	\$0.00		
	DWELLING STRUCTURES								
GA094-1	a. HVAC Systems	1460	24	\$0.00	\$0.00	\$0.00	\$0.00		
GA094-2		1460	12	\$0.00	\$0.00	\$0.00	\$0.00		
GA094-3		1460	12	\$45,759.36	\$31,588.54	\$0.00	\$0.00	No Progress	
GA094-4		1460	8	\$31,459.56	\$21,717.13	\$0.00	\$0.00	No Progress	
GA094-5		1460	30	\$111,538.44	\$76,997.08	\$0.00	\$0.00	No Progress	
GA094-6		1460	6	\$22,879.68	\$15,794.27	\$0.00	\$0.00	No Progress	
GA094-7		1460	20	\$74,358.96	\$51,331.38	\$0.00	\$0.00	No Progress	
GA094-8		1460	42	\$0.00	\$0.00	\$0.00	\$0.00		
GA094-9		1460	16	\$0.00	\$0.00	\$0.00	\$0.00		
GA094-10		1460	8	\$0.00	\$0.00	\$0.00	\$0.00		
	SUBTOTAL			\$285,996.00	\$197,428.40	\$0.00	\$0.00		
	GRAND TOTAL			\$308,874.00	\$308,874.00	\$89,067.60	\$0.00		

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 12/31/02 Part III: Implementation Schedule

Turt IIII Imprem	circultion by	ciicaaic					
PHA Name: The Housing	PHA Name: The Housing Authority of the City of Lavonia, GA Grant Type and Nu Capital Fund Programmer Type And Programmer Type And Programmer Type And Programmer Type And Pro		Type and Nur	nber		Federal FY of Grant: 2002	
City of Lavonia, GA			al Fund Progra	m No: GA06P09	450102		
		Repla	cement Housir	ng Factor No:			
Development Number	All	Fund Obligate	ed	A	ll Funds Expended	l	Reasons for Revised Target Dates
Name/HA-Wide	(Qua	rter Ending Da	ate)	(Q	uarter Ending Date	e)	
Activities							
	Original	Revised	Actual	Original	Revised	Actual	
PHA Wide	7/1/04	6/30/04		7/1/06	6/30/06		Need maximum time frames allowed by HUD for
GA094-3	7/1/04	6/30/04		7/1/06	6/30/06		Obligation & Expenditure of funds per LOCC's Contract
GA094-4	7/1/04	6/30/04		7/1/06	6/30/06		Dates.
GA094-5	7/1/04	6/30/04		7/1/06	6/30/06		
GA094-6	7/1/04	6/30/04		7/1/06	6/30/06		
GA094-7	7/1/04	6/30/04		7/1/06	6/30/06		

GA094-1	24 Units	GA094-6 6 Units
GA094-2	12 Units	GA094-7 20 Units
GA094-3	12 Units	GA094-8 42 Units
GA094-4	8 Units	GA094-9 16 Units
GA094-5	30 Units	GA094-10 8 Units

Attachment G – FY2001 P & E Report

CAPITAL FUND PROGRAM TABLES START HERE

Ann	ual Statement/Performance and Evalua	ation Report				
Cap	ital Fund Program and Capital Fund P	rogram Replaceme	nt Housing Factor (CFP/CFPRHF) Pa	art I: Summary	
	PHA Name: The Housing Authority of the City of Lavonia, Grant Type and Number					
GA	,	Capital Fund Program Gra	nt No: GA06P09450101		2001	
		Replacement Housing Fact	tor Grant No:			
	ginal Annual Statement Reserve for Disasters/ Emer		Statement (revision no: 1)			
	formance and Evaluation Report for Period Ending: 1		ance and Evaluation Report			
Line	Summary by Development Account	Total Esti	mated Cost	Total .	Actual Cost	
No.						
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations	\$6,878.00	\$229,756.00	\$229,756.00	\$175,444.84	
3	1408 Management Improvements					
4	1410 Administration					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	\$20,000.00	\$19,450.00	\$19,450.00	\$6,083.85	
8	1440 Site Acquisition		10.00		10.00	
9	1450 Site Improvement	\$24,000.00	\$0.00	\$0.00	\$0.00	
10	1460 Dwelling Structures	\$271,000.00	\$77,672.00	\$77,672.00	\$77,672.00	
11	1465.1 Dwelling Equipment—Nonexpendable	\$5,000.00	\$0.00	\$0.00	\$0.00	
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collaterization or Debt Service					
20	1502 Contingency					
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$326,878.00	\$326,878.00	\$326,878.00	\$259,200.69	
22	Amount of line 21 Related to LBP Activities					
23	Amount of line 21 Related to Section 504 compliance					

Small PHA Plan Update Page 36 **Table Library**

Ann	Annual Statement/Performance and Evaluation Report								
Capi	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary								
PHA N	Name: The Housing Authority of the City of Lavonia,	Grant Type and Number			Federal FY of Grant:				
GA		Capital Fund Program Gra	ant No: GA06P09450101		2001				
		Replacement Housing Fac	tor Grant No:						
Ori	ginal Annual Statement Reserve for Disasters/ Emer	rgencies Revised Annual	Statement (revision no: 1)						
⊠ Per	formance and Evaluation Report for Period Ending: 12	2/31/02 Final Perform	nance and Evaluation Repor	t					
Line	Summary by Development Account	Total Esti	imated Cost	Total Actual Cost					
No.									
		Original	Revised	Obligated	Expended				
24	Amount of line 21 Related to Security – Soft Costs								
25	Amount of Line 21 Related to Security – Hard Costs								
26	Amount of line 21 Related to Energy Conservation								
	Measures								

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 12/31/02 Part II: Supporting Pages

PHA Name: The Housing Authority of the City of Lavonia, GA		Replacement Ho	ogram Grant No: ousing Factor Gra		Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	ev. Acct No. Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	<u>OPERATIONS</u>							
PHA Wide	Operations	1406	178	\$6,878.00	\$229,756.00	\$229,756.00	\$175,444.84	In Progress
	SUBTOTAL			\$6,878.00	\$229,756.00	\$229,756.00	\$175,444.84	
	FEES & COSTS							
GA094-1	a. Architects fee to prepare bid and	1430.1	24	\$19,000.00	\$18,750.00	\$18,750.00	\$6,083.85	In Progress
	contract documents, drawings,							
	specifications and assist the PHA at							
	bid opening, awarding the contract, and							
	to supervise the construction work							
	on a periodic basis. Fee to be negotiated							
	Contract Labor							
	Subtotal			\$19,000.00	\$18,750.00	\$18,750.00	\$6,083.85	
GA094-1	b. Consulting fees for Agency Plan	1430.2	24	\$100.00	\$70.00	\$70.00	\$0.00	Obligated
GA094-2	preparation.	1430.2	12	\$100.00	\$70.00	\$70.00	\$0.00	"
GA094-3		1430.2	12	\$100.00	\$70.00	\$70.00	\$0.00	
GA094-4		1430.2	8	\$100.00	\$70.00	\$70.00	\$0.00	"
GA094-5		1430.2	30	\$100.00	\$70.00	\$70.00	\$0.00	"
GA094-6		1430.2	6	\$100.00	\$70.00	\$70.00	\$0.00	"

Small PHA Plan Update Page 38 **Table Library**

HUD 50075 OMB Approval No: 2577-0226 Expires: 03/31/2002

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 12/31/02

Part II: Supporting Pages

PHA Name: The Housing Authority of the City of Lavonia, GA				: GA06P0945010 ant No:	Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
GA094-7		1430.2	20	\$100.00	\$70.00	\$70.00	\$0.00	44
GA094-8		1430.2	42	\$100.00	\$70.00	\$70.00	\$0.00	44
GA094-9		1430.2	16	\$100.00	\$70.00	\$70.00	\$0.00	"
GA094-10		1430.2	8	\$100.00	\$70.00	\$70.00	\$0.00	"
	Subtotal			\$1,000.00	\$700.00	\$700.00	\$0.00	<u> </u>
	SUBTOTAL		_	\$20,000.00	\$19,450.00	\$19,450.00	\$6,083.85	
	SITE IMPROVEMENTS							
GA094-1	Grading, drainage, landscaping &	1450	24	\$24,000.00	\$0.00	\$0.00	\$0.00	Deferred
	paving & utilities.							
	SUBTOTAL			\$24,000.00	\$0.00	\$0.00	\$0.00	
	DWELLING STRUCTURES							
GA094-1	a. Install windows/screens.	1460	24	\$271,000.00	\$48,631.00	\$48,631.00	\$48,631.00	Completed
	Defer installation of gypsum board on				·			•
	Walls, attic insulation, and replacement							
	Of ceilings & HVAC.							
GA094-9	b. Install windows/screens with fungi-	1460	16	\$0.00	\$29,041.00	\$29,041.00	\$29,041.00	Added/
	bility from FFY 2003.							Completed

Small PHA Plan Update Page 39 **Table Library**

Annual Statement/Performance and Evaluation Report Budget Revision #1 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) 12/31/02 Part II: Supporting Pages

PHA Name: The Housing Authority of the City of Lavonia, GA		Grant Type and	l Number	Federal FY of Grant: 2001				
		Capital Fund Pr	ogram Grant No:	GA06P0945010				
		Replacement Ho	ousing Factor Gra	nt No:				
Development General Description of Major Work Number Categories Name/HA-Wide Activities		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	SUBTOTAL			\$271,000.00	\$77,672.00	\$77,672.00	\$77,672.00	
	DWELLING EQUIPMENT-							
	NONEXPENDABLE							
GA094-1	a. Replace ranges & refrigerators	1465	1	\$500.00	\$0.00	\$0.00	\$0.00	Deleted
GA094-2		1465	1	\$500.00	\$0.00	\$0.00	\$0.00	Deleted
GA094-3		1465	1	\$500.00	\$0.00	\$0.00	\$0.00	Deleted
GA094-4		1465	1	\$500.00	\$0.00	\$0.00	\$0.00	Deleted
GA094-5		1465	1	\$500.00	\$0.00	\$0.00	\$0.00	Deleted
GA094-6		1465	1	\$500.00	\$0.00	\$0.00	\$0.00	Deleted
GA094-7		1465	1	\$500.00	\$0.00	\$0.00	\$0.00	Deleted
GA094-8		1465	1	\$500.00	\$0.00	\$0.00	\$0.00	Deleted
GA094-9		1465	1	\$500.00	\$0.00	\$0.00	\$0.00	Deleted
GA094-10		1465	1	\$500.00	\$0.00	\$0.00	\$0.00	Deleted
	SUBTOTAL			\$5,000.00	\$0.00	\$0.00	\$0.00	
	GRAND TOTAL			\$326,878.00	\$326,878.00	\$326,878.00	\$259,200.69	
				,	,		ĺ	

Annual Statement/Performance and Evaluation Report	Budget Revision	#1
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP)	(CFPRHF) 12/31	/02
Part III: Implementation Schedule		

PHA Name: The Housing Authority of the City of Lavonia, GA			Type and Nun al Fund Program	n ber m No: GA06P09 4	4 50101	Federal FY of Grant: 2001	
•			cement Housin				
Development Number	All F	Fund Obligate	ed	A	ll Funds Expended	l	Reasons for Revised Target Dates
Name/HA-Wide Activities	(Quart	ter Ending D	ate)	(Q	uarter Ending Date	e)	
	Original	Revised	Actual	Original	Revised	Actual	
GA094-1	3/30/03		3/31/02	6/30/04	6/30/05		Need maximum time frame allowed by HUD for
GA094-2	3/30/03		3/31/02	6/30/04	6/30/05		expenditure of funds per LOCC's Contract Dates.
GA094-3	3/30/03		3/31/02	6/30/04	6/30/05		"
GA094-4	3/30/03		3/31/02	6/30/04	6/30/05		"
GA094-5	3/30/03		3/31/02	6/30/04	6/30/05		"
GA094-6	3/30/03		3/31/02	6/30/04	6/30/05		"
GA094-7	3/30/03		3/31/02	6/30/04	6/30/05		"
GA094-8	3/30/03		3/31/02	6/30/04	6/30/05		"
GA094-9	3/30/03		3/31/02	6/30/04	6/30/05		"
GA094-10	3/30/03		3/31/02	6/30/04	6/30/05		u

GA094-1	24 Units	GA094-6 6 Units
GA094-2	12 Units	GA094-7 20 Units
GA094-3	12 Units	GA094-8 42 Units
GA094-4	8 Units	GA094-9 16 Units
GA094-5	30 Units	GA094-10 8 Units

Attachment H: Voluntary Conversion

Component 10 (B) Voluntary Conversion Initial Assessments

- a. How many of the PHA's developments are subject to the Required Initial Assessments? NINE-GA094-1, 2, 3, 4, 5, 6, 7, 8 & 9
- b. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)? **ONE-GA094-10**
- c. How many Assessments were conducted for the PHA's covered developments? **One for each Project.**
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments: **N/A**

Development Name	Number of Units
_	

e. If the PHA has not completed the Required Initial Assessments, describe the status of these assessments: **N/A**

Attachment I: Deconcentration & Income Mixing

(6) Deconcentration and Income Mixing

a. X Yes No:	Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
b. 🛛 Yes 🗌 No:	Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments			
Development Name :	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)((iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]
GA094-1	24	10 vacancies in this development of 24 units have been replaced since last years analysis range of 117%. Some of our residents have lost jobs and can't find good jobs.	
GA094-4	8	All residents except one either works or has family members who work and has good income. The remaining one has \$4,320 income but has five children (deductions) resulting in her being on \$35 credit rent.	

Attachment J: Progress on FY2000 Missions & Goals

Lavonia Housing Authority has begun work on our CFP project by replacing windows and screens in developments 94-1 & 9. Windows and screens is planned for in 2003 at 94-2, 8A & 10. Roofing is planned for 2003 at 94-1, 3, 7, 8 & 10. Exterior doors & storm doors are planned at 94-1, 2, 8A, 9 & 10. We are making every effort make our projects and units as attractive and comfortable as possible.			